

Overview



- · Mealtime
 - Values, beliefs, routines
- · Challenges
 - Setting Environment
 - Self feeding
 - Picky and problem eaters
- Evaluation
- · Strategies case examples

Mealtimes



- · Gathering family, relatives, friends
- · Consider settings
 - Home, restaurant, preschool, day care
- · Mealtime routines
 - Prepare a meal
 - Setting table
 - Sitting down at the table
 - Eating the meal, leaving the table
 - Clean up
- · Child's idiosyncrasies and behaviors impact each routine

Mealtime Challenges

- · Atypical eating behavior
 - (food refusals, selectivity or usual behavior or ritual related to mealtimes) in 80% of children with ASD (Dominick, 2007)
- · Challenges often increase at over one year of age.
 - When children make the transition to mixed textured foods.
 - Time when children's taste buds shift
 - Typically start to explore a wider variety of tastes and seasonings (less bland food)
- · Food pickiness is very common in toddlers/pre-schoolers
 - ~ 20% of children will have feeding issues before age 5
 - Food pickiness increased between 4 24 months
 - ~ 50% of 2 year olds demonstrated picky eating
- · Food pickiness
 - Food refusals, limited repertoire of foods, still eat more than 30 foods, get nutritional needs met

Picky versus Problem eaters

- Problem eaters (Toomey, 2010)
 - Food repertoire less than 20 foods
 - Foods lost due to food jags are not re-acquired,
 - Child cries and melts down with new foods
 - Refuses entire categories of food texture or nutrition groups (e.g. wet foods, meats)
 - Almost always eats different foods from family
 - Persistently reported as picky eater over multiple well child visits

Other Challenges

- Atypical eating behavior (Dominick, 2007)
 - Resist new foods,
 - Food selectivity
 - · Limit foods based on textures, colors, shapes
 - Usual behaviors or rituals related to mealtimes
 - Have problems with gagging pocketing food
 - Difficulty eating at regular restaurants
 - Resist sitting at the table

Medical Challenges

- GI issues
 - 50-70% of kids with ASD have GI issues.
- Swallowing issues
 - · Check muscle tone
 - · Tendency to aspirate food
 - · Dysarthria
- Allergies
 - Gluten/Casein
- Sensory Issues

Mealtime Environment



- Physical context
 - · Sounds, smells, sights within mealtime setting
- Sociocultural influences
 - · Family values
 - · Family mealtime routines
 - Cultural Beliefs
 - portion sizes
 - amount of food on table
 - child dependence/independence

Evaluation



- Mealtime Survey (Provost et al., 2010)
 - child focused history, behaviors, settings etc.
- The Brief Autism Mealtime Behavior Inventory (BAMBI) Lukens & Linscheid (2008)
- · Get list of foods child will eat
- Obtain information about settings & routines for meals
 - Home, school, day care, relative's homes
- · Assess sensory processing & behaviors
- · Assess oral motor
- Observe mealtime



Mealtime Strategies



- Making mealtime a "non-issue" relieves stress and increases potential for increased food variety (Chatoor, 2009)
- Repetition of exposure and tastes (Chatoor, 2009; Martins, Robson & Young, 2008)
- Routines and rituals (Martins et al., 2008; Marquenie, Rodger, Mangohig and Cronin, 2010)

Strategies



- How can we create an environment to promote mealtime participation?
- How can we introduce and get child to eat more foods?
- What sensory supports can be incorporated before and during the meal to enhance success?
- Are there simple strategies to 'prepare' the oral motor muscles for greater motor control during eating?

Environment

- Seating
 - How positioned? Chair
 - Where positioned?
- Sounds
 - Too many, too loud
- Sights
 - Too many, too bright
- Smells
 - Strong odors prepare earlier

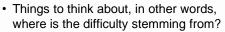
Case Example: Low Tone

- Posture: Does she have enough support to provide appropriate and useful posture for mealtime?
- Strength: What food texture is she capable of consuming safely considering how the facial muscles are functioning at this point in time?
- Alertness: Does she have the appropriate level of sensory input to allow her to sit still and/or be able to focus on the task at hand?
- Preparation: What do we need to do so that the above is at the appropriate level to begin the process of a successful eating experience?



Warm ups & strengthening Whistles, Instruments Bubbles, Imitation, etc.

Autism Spectrum Disorder



- ☐ Is there a GI concern?
- ☐ Is there a sensory element? If so is it related to texture, environment, odor, sounds, etc.?
- □ Is learned behavior a factor?

- ☐ Concerned about home only or at relatives and restaurants as well?
- ☐How do peers play a role?
- □What is enabling the difficulty?

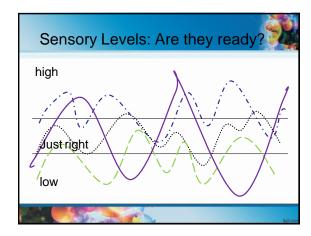
Many factors to take into account

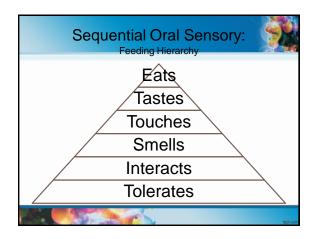
What are they eating?

How are they eating it?









Redefine Try It (Klein, (2009)



- See someone else eating food
- Food in serving dish nearby
- Smell the food
- Touch the food with a utensil
- Hand the food to others; Feed someone else
- Serve the food
- Have new food in special bowl
- Remove food from plate
- Use regular plate and allow new food to stay
- Kiss food lick food put food in mouth and take out

Progression to Mealtime



- · Facilitate progression
 - Set up the environment for the child to progress to the next step
- Consistency and Trust
- Encouragement





References - Websites

- Interview on Addressing Selective Eating in Children:
- http://www.theautismlife.com/interviews/center.for.selective.eating.and.pediatric.feeding.disorders.interview
- Kids Health and Nutrition:
 http://kidshoolth.org/parent/centers/fits
- http://kidshealth.org/parent/centers/fitness_nutrition_cent er.html
- Klein, M. D. (2009). Mealtime challenges and the autism spectrum. PDF @ http://www.mealtimenotions.com/GuestOpinions/12-2009Mealtime%20Autism.pdf
- Toomey, K. (2010). The top ten myths about mealtime. Retrieved from: http://www.spdparentzone.org/resources/TOP%20TEN%20MYTHS %200F%20MEALTIME%20IN%20AMERICA.pdf
- Toomey, K. (2010). When children won't eat: Understanding the why's and how to help. Retrieved 10/17/12 from http://www.spdparentzone.org/resources/When%20Children%20Won1%20Eat.pdf

References

- Bandini, L. G., Anderson, S. E., Curtin, C., Cermark, S., Evans, E. W., Scampini, R., & Must, A. (2010). Food selectivity in children with Autism Spectrum Disorders and typically developing children. The Journal of Pediatrics, 157(2), 259-264.
- Chatoor, Irene. (2009). Sensory food aversions in infants and toddlers. Zero To Three. Accessed from http://www.zerotothree.org
- Ernsperger, L, & Stegen-Hanson, T. (2004). Just Take a Bite: Easy, Effective Answers to Food Aversions and Eating Challenges. Arlington, TX: Future Horizons.
- Klein, M. D. (2003). The "get permission" approach to mealtimes and oral motor treatment. [DVD] Mealtime Notions. http://www.mealtimenotions.com
- Seinfeld, J.(2007 Deceptively Delicious: Simple Secrets to Get Your Kids Eating Good Food. New Yorkm NY: Melcher Media..

References - Research

- Marquenie, K., Rodger, S., Mangohig, K., & Cronin, A. (2011). Dinnertime and bedtime routines and rituals in families with a young child with an autism spectrum disorder. Australian Occupational Therapy Journal, 1-10, doi: 10.11111/j.1440-1630.2010.00896.x
- Provost, B., Crowe, T. K., Osbourn, P. L., McClain, C., & Skipper, B. J. (2010). Mealtime behaviors of preschool children: Comparison of children with autism spectrum disorder and children with typical development. *Physical & Occupational Therapy in Pediatrics*, 30(3), 220-233.
- Taylor-Lukens, C., & Linscheid, T. R. (2008). Development and validation of an inventory to assess mealtime behavior problems in children with autism. *Journal of Autism and Developmental Disorders*, 38, 342-352. DOI: 10:1007/s10803-007-0401-5

foot com

'n	1	۱	
١	L	ı	